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1646

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REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT

Application Number	09/753,139
Filing Date	December 29, 2000
First Name Inventor	Quirk
Group Art Unit	1646
Examiner Name	
Attorney Docket Number	11301-0200 (44040-227522)

To: Commissioner for Patents

PO Box 1450
Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above identified application.

The reasons for this request are: Conflict of Interest

1. The correspondence address is NOT affected by this withdrawal.
2. Change the correspondence address and direct all future correspondence to:

CORRESPONDENCE ADDRESS

Customer Number → Place Customer Number
Bar Code Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Schwegman, Lundberg, Woessner & Kluth, PA		
Address	1600 TCF Tower		
Address	121 South Eighth Street		
City	Minneapolis	State	MN
Country	USA		
Telephone	612-373-6900	Fax	612-339-3061

- This request is made on behalf of myself and
 all the attorneys/agents of record,
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 the attorneys/agents associated with Customer Number _____

This request is enclosed in triplicate (including any attachments).

Name	Robert E. Richards – Reg. No. 29,105
Signature	
Date	6-20-03

NOTE: Withdrawal is effective when approved rather than when received

Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

APPROVED

 Michael J. Plourde
 SPC, TC 1600
 7/23/03

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